

SECRET

PERSONALITY (201) FILE REQUEST

TO RI/ANALYSIS SECTION		DATE 4 Oct. 1956
FROM RI/C ^U Per EE/G		ROOM NO. 2301-L
		TELEPHONE 3127

INSTRUCTIONS: Form must be typed or printed in block letters.

SECTION I: List 201 number, name, and identifying data in the spaces provided. All known aliases and variants (including maiden name, if applicable) must be listed. If the identifying data varies with the alias used, a separate form must be used. Write UNKNOWN for items you are unable to complete.

SECTION II: List cryptonym or pseudonym if assigned. If true name is sensitive, fill in the 201 number and Section II only. If true name is non-sensitive, both Sections I and II must be completed.

SECTION III: To be completed in all cases.

SECTION I

1. NAME (Last) (First) (Middle) (Title)				
KULIKOVSKIS, George Gaston				
NAME VARIANT				
NAME (Last) (First) (Middle) (Title)				
PHOTO	4. BIRTH DATE	5. COUNTRY OF BIRTH	6. CITY OR TOWN OF BIRTH	7. OTHER IDENTIFICATION
YES	NO	141222	Latvia	Vickak
OCCUPATION/POSITION				OCC/POS. CODE

SECTION II

CRYPTONYM OR PSEUDONYM CADRE	SENSITIVE <input checked="" type="checkbox"/> NON-SENSITIVE <input type="checkbox"/>
---------------------------------	---

SECTION III

COUNTRY OF RESIDENCE	10. ACTION DESK EE/G	11. 2ND CITY INTEREST	12. 3RD CITY INTEREST	12A.
----------------------	-------------------------	-----------------------	-----------------------	------

COMMENTS:

Restricted to EE/G

RI COPY

OPEN FILE	RESTRICTED FILE	SIGNATURE		
YES	NO	YES	NO	

FORM NO. 831 TEST
1 NOV 55

SECRET

(38)

DECLASSIFIED AND RELEASED BY
CENTRAL INTELLIGENCE AGENCY
SOURCES METHODSEXEMPTION 3B26
NAZI WAR CRIMES DISCLOSURE ACT
DATE 2006